

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration or Declaration
Submitted Submitted
with Initial after Initial
Filing Filing (surcharge (37
CFR 1.16(e)) required)

Attorney Docket Number	DON01 P-1116
First Named Inventor	Ian A. McCabe
<i>COMPLETE IF KNOWN</i>	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ELECTRO-OPTIC REFLECTIVE ELEMENT ASSEMBLY

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **11/05/2003** as United States Application Number or PCT International

Application No. **PCT/US2003/035381** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet PTO/SB/02B attached hereto:

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

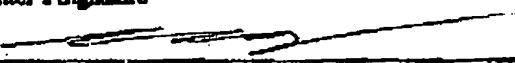
If you need assistance completing the form, call 1-800-PTO-9199 and select option 2

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION - Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	28101	OR <input type="checkbox"/>	Correspondence address below
Name _____					
Address _____					
City _____		State _____		ZIP _____	
Country _____		Telephone 616/975-5500		Fax 616/975-5505	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.			
Given Name (first and middle [if any])		Family Name or Surname			
Ian A.		McCabe			
Inventor's Signature <i>Sally Chase</i>				Date 5/3/2005	
Residence: City Holland	State Michigan	Country USA	Citizenship Ireland		
Mailing Address 16092 Ransom Street					
City Holland	State Michigan	Zip 49424	Country USA		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.			
Given Name (first and middle [if any])		Family Name or Surname			
Desaraju		Varaprasad			
Inventor's Signature				Date	
Residence: City Holland	State Michigan	Country USA	Citizenship USA		
Mailing Address 1281 Innisbrook Court					
City Holland	State Michigan	Zip 49423	Country USA		
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB/02A or D2LR attached hereto.					

DECLARATION - Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	<input type="text" value="28101"/>	OR <input type="checkbox"/> Correspondence address below
Name _____				
Address _____				
City _____		State _____	ZIP _____	
Country _____	Telephone 616/975-3500	Fax 616/975-5505		
I hereby declare that all statements made hereto of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle [if any])		Family Name or Surname		
Ian A.		McCabe		
Inventor's Signature				Date
Residence: City	State	Country	Citizenship	
Holland	Michigan	USA	Ireland	
Mailing Address				
16092 Ransom Street				
City	State	Zip	Country	
Holland	Michigan	49424	USA	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle [if any])		Family Name or Surname		
Desaraju		Varaprasad		
Inventor's Signature				Date
				4 - 29 - 05
Residence: City	State	Country	Citizenship	
Holland	Michigan	USA	USA	
Mailing Address				
1281 Innishbrook Court				
City	State	Zip	Country	
Holland	Michigan	49423	USA	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 2 supplements thereto PTO/SB/02A or 02LR attached hereto.				

Please type a plus sign (+) inside this box +

PTO/SB/02A (09-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	Page 1 of 1
--------------------	--	---	-------------

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Hamid		Habibi	
Inventor's Signature	<i>Hamid Habibi</i>		Date 5-3-2005
Residence: City Holland	State Michigan	Country USA	Citizenship USA
Mailing Address 4057 66TH Street			
City Holland	State Michigan	Zip 49423	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Niall R.		Lynam	
Inventor's Signature	<i>Niall Lynam</i>		Date 4/28/05
Residence: City Holland	State Michigan	Country USA	Citizenship USA
Mailing Address 248 Foxdown			
City Holland	State Michigan	Zip 49424	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.